

APR 12 2006

**FAX TRANSMISSION****DATE:** April 12, 2006**PTO IDENTIFIER:** Application Number 10/714,105  
Patent Number**Inventor:** James N. Dieffenderfer et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** CONNOLLY BOVE LODGE & HUTZ LLP

Myron Keith Wyche

**PHONE:** (202) 331-7111**Attorney Dkt. #:** 20421-00071-US**PAGES (Including Cover Sheet):** 19**CONTENTS:** Amendment (14 pages)  
Certificate of Transmission (1 page)  
Terminal Disclaimer by Applicant Attorney (2 pages)  
Fee Transmittal (1 page)  
Charge \$330.00 to deposit account 50-0563

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (202) 331-7111 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

**CONNOLLY BOVE LODGE & HUTZ LLP**  
1990 M Street, N.W., Suite 800, Washington, DC 20036  
Telephone: (202) 331-7111 Facsimile:

PTO/SB/97 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031

U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

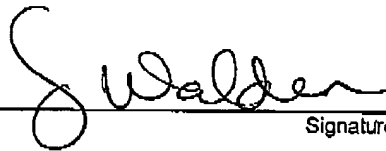
Application No. (if known): 10/714,105

Attorney Docket No.: 20421-00071-US

## Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on April 12, 2006  
Date



Signature

Jimani Walden

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Amendment (14 pages)

Fax Transmission (1 page)

Terminal Disclaimer by Applicant Attorney (2 pages)

Charge \$330.00 to deposit account 50-0563

Fee Transmittal (1 page)

APR 12 2006

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0551-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4518).  <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number: 10/714,105 Filing Date: November 14, 2003 First Named Inventor: James N. Dieffenderfer Examiner Name: Gregory P. Hein Art Unit: 2188 Attorney Docket No.: 20421-00071-US	
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 330.00			

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: 50-0563    Deposit Account Name: IBM Corporation (Research Triangle Park)	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		Small Entity		Small Entity		Small Entity	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
						Small Entity	
						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<b>Total Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		
_____		_____	_____	_____	Fee (\$)		Fee Paid (\$)
<b>Indep. Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
4		1	200	200.00			
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>		<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
_____		_____	_____ / 50		_____ (round up to a whole number) x	_____	
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)						<b>Fees Paid (\$)</b>	
Other (e.g., late filing surcharge): 1814 Statutory Disclaimer						130.00	

<b>SUBMITTED BY</b>			
Signature	<i>Myron Keith Wyche</i>	Registration No. (Attorney/Agent)	47,341
Name (Print/Type)	Myron Keith Wyche	Telephone	(202) 331-7111
		Date	April 12, 2006